

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.   | DATE     |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION         | JM       | 48       | 10/13/01 |
| O.I.P.E. CLASSIFIER       |          |          | 10/21/01 |
| FORMALITY REVIEW          | RS       | 10/17/01 | 12-4-01  |
| RESPONSE FORMALITY REVIEW | MD       | JC90T    | 08/28/01 |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Date     |
|-------|----------|
| Final | Original |
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| Claim | Date     |
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| Final | Original |
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| Claim | Date     |
|-------|----------|
| Final | Original |
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If more than 150 claims or 10 actions  
staple additional sheet here